



INVOICE

BILL TO:

PROSPONSIVE LOGISTICS
4220 INTERNATIONAL PKWY STE 300
ATLANTA, GA 30354

INVOICE DATE: 04/24/2025**INVOICE #:** R87769**TERMS:** NET 30**DUE DATE:** 05/24/2025

| DATE | CUSTOMER REF# | ORIGIN - DESTINATION | QUANTITY | RATE | AMOUNT |
|------------|---------------|---|----------|----------|----------|
| 04/23/2025 | | 1925 Stone Ct, Mishawaka, IN 46545 - 400 N Main St, Henning, IL 61848 | | | |
| | | Freight Income | 1 | \$700.00 | \$700.00 |

TOTAL

\$700.00

PLEASE NOTE

The right to payment under this invoice has been assigned to Compass payment Solutions LLC (CFS) and all payments hereunder are to be directed to the assignee at the address noted below.

Remittances to other than CFS do not constitute payment of this invoice. CFS must be given notification of any claims, agreements or merchandise returns which would affect the payment of all or part of this Invoice on the due date.

COMPASS FUNDING SOLUTIONS LLC

P.O.BOX 205154

DALLAS, TX 75320-5154

Tel: 844-899-8092

Carrier Rate and Load Confirmation



C.L. Services, Inc. dba Prospensive Logistics
4220 International Pkwy Ste 300
Atlanta, Georgia 30354
Connor Caldwell
ccaldwell@prospensive.com

Load Number: Load-821525

Date: 04/23/2025

Equipment Type: Dry Van 53'

Initials:

Truck Number:

Cancel Reason Code:

Hazmat Required: ☐

Time Sent: 4/23/2025 12:20 PM

Special Driver Instructions:

Payment Processor: Prospensive Logistics uses TriumphPay to pay all Carrier Invoices

Special Instructions:

Carrier: ZIGI FREIGHT INC

Contact: Ivy ROYAL3, (p) (630) 485-7370 EX111 (f) (630) 485-6980

Permits Required: ☐

Signature:

Trailer Number:

Freight Temperature:

Temperature Units:

Tracking Agreement:

Total Insurance Amount: 100,000.00

Acceptable Equipment Types:

Shipper Pickup (Stop 1)

1925_STONE_CT_MISHAWAKA_IN
1925 STONE CT
MISHAWAKA, IN US 46545

Expected Date: 04/23/2025

Shipping/Receiving Hours:

Appointment Required: Yes

Appointment Time: 19:00

Pickup Instructions: Shipper Instructions: Customer Instructions: POD'S MUST BE SUBMITTED AS A PDF IN ORDER FOR PAYMENT TO PROCESSED IMMEDIATELY AFTER BEING RECEIVED. DRIVER MUST INSPECT TRAILER AT THE SHIPPER AND MAKE SURE THE LOAD IS FULLY SECURED TO AVOID ANY SHIFTING OF THE PRODUCT. NO REEFER OR ROLL UP DOORS; Prenotification must be made and acknowledged with dispatch prior to 30 minutes of detention for the fee's to be approved. SWING DOORS ONLY. MUST BE FOOD GRADE TRL AND ODORLESS

Shipper References:

Pickup/Delivery Number: 4831684-10 / 4821980-10 / 4826053-10

Shipping/Receiving Hours:

Shipping/Receiving Contact:

PO Number: 11952553

EDI References: OID Reference Number:11952553

Consignee Delivery (Stop 2)

400_N_MAIN_ST_HENNING_IL
400 N MAIN ST
HENNING, IL US 61848

Expected Date: 04/24/2025

Shipping/Receiving Hours:

Appointment Required: Yes

Appointment Time: 08:30

Delivery Instructions: Shipper Instructions: Customer Instructions: NO REEFER OR ROLL UP DOORS; Prenotification must be made and acknowledged with dispatch prior to 30 minutes of detention for the fee's to be approved.

Consignee References:

Pickup/Delivery Number:

Shipping/Receiving Hours:

Shipping/Receiving Contact:

PO Number: 11952553

EDI References: OID Reference Number:11952553

| Shipment Information | | | | | | | | | | | | |
|----------------------|------|---------|---------|-----------|--------|-----------------------|--------|-------|--------|-----------------|----------|------------|
| Handling Unit | | Package | | | | | | | | | LTL Only | |
| Qty | Type | Qty | Type | Weight | HM (X) | Commodity Description | Length | Width | Height | Dimension Units | NMFC # | NMFC Class |
| 0 | | 1 | Pallets | 42500 lbs | | Item | | | | | | |

| Carrier Fees | |
|---------------------|-------------------|
| Description | Cost |
| Net Freight Charges | USD 700.00 |
| Total Cost | USD 700.00 |

Proponsive Logistics hours are from 7:30 am to 5:30 pm EST

If you need any assistance after-hours, please call 678-686-0933

PAYMENT 3 OPTIONS TO PREVENT DELAYS (Please Make Note of Address Changes):

1. Email BOL, Invoice, and all other documents to invoicing@proponsive.com THE LOAD NUMBER MUST BE IN THE SUBJECT LINE – NO EXCEPTIONS!

2. Send all paperwork via fax to 678-686-0943

3. Mail all paperwork to:

CL Services Inc. dba Proponsive Logistics

4220 International Parkway

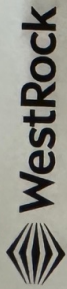
Suite 300

Atlanta Ga 30354

This confirmation is an agreement between C.L. Services, Inc. and CARRIER listed, to haul the indicated load at the rate listed on the rate confirmation. CARRIER is not dispatched with receipt of the confirmation. This is a brokered load. This load is exclusive use of the trailer, unless otherwise noted on the rate confirmation. Shipper/Receiver shall be responsible for payment only to BROKER.

By accepting this load, CARRIER agrees to Proponsive's terms and conditions (<https://proponsive.com/terms-conditions/>) and releases the shipper/receiver from any liability for payment of transportation charges.

X _____



STRAIGHT BILL OF LADING - SHORT FORM - Original - Not Negotiable

CUSTOMER'S RECEIPT

Mishawaka Plant-
1925 STONE COURT
MISHAWAKA, IN
46545-4486

WestRock CP, LLC
C/O Cass Information Systems
P.O. Box 67
St. Louis, MO 63166-0067

SHIPPING MANIFEST
(Delivery Receipt)

RECEIPT #: 4382158650

DATE: 4/23/2025

Master BOL Number: 438202534946

BILL TO

CONAGRA FOODS INC
PO BOX 982192
EL PASO, TX
79998-2192

SHIP TO

FULLFILL INDUSTRIES
400 N MAIN ST
HENNING, IL
61848-8000

ACCOUNT NUMBER

317052

LOCATION #

600948

LOAD #

34946

Subject to Section 7 of the Terms and Conditions of carriage. If this shipment is to be delivered to consignee without recourse on the consignor, the consignor shall sign the following statement. The Carrier shall not be liable for the shipment without payment of the freight and all other lawful charges. Received, subject to the COMMON CARRIER AGREEMENT # or the contract # BETWEEN THE SHIPPER AND THE CARRIER, in effect on the date of shipment, the property described below, in apparent good order, except as noted contents and condition of contents of packages or individual items, and as indicated below. This Bill of Lading is not subject to any tariffs or classifications whether individually determined or filed with any federal or state authority, except as specifically agreed in writing by the shipper and the carrier. Subject to terms and conditions prescribed in part 1025 Appendix B, Title 49, Code of Federal Regulations. NOTE: Carrier is responsible for providing sufficient load locks or straps with every trailer to ensure security of products during transit.

TRAILER #

P5260130

CARRIER:
CL SERVICES INC

SCAC:

CVQC

SHIPPING INSTRUCTIONS: Receiving hours: 06:00AM-15:30. Must make an appointment: deliveries@conagra.com and kelly.scott@conagra.com
SEND COA WITH EVERY SHIPMENT - MUST SEAL TRAILER - SEAL # A528406

Freight

PrePaid

| ORDER NO | CUSTOMER PO# | DESCRIPTION | QTY ORDERED | UNITS | QTY/UNITS | TOTAL COUNT | P/C |
|----------|--------------|--|-------------|-------|---------------|-------------|-----|
| 9967312 | 4831684-10 | IDENT:10120529 STYLE:HSC w/Flap on drawing bottom 48 x 38 1/2 x 36 1/2 MSF 74.57 PRODUCT DESIGN NO: 1281139 | 1000 | 6 | 1 90 5 200 | 1,090 | C |

PALLET(S) SHIPPED:

SUBJECT TO INSPECTION

Signature

Kelly Scott 4-24-25

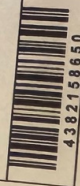
PALLET(S) RECEIVED:

| | | | |
|---------------------|-------------------|------------------------|---------------------------|
| TOTAL FT2: 74570 | TOTAL UNITS: 6 | TOTAL WEIGHT: 7,308 | RECEIVED IN GOOD ORDER BY |
|---------------------|-------------------|------------------------|---------------------------|

☐ TRAILER DROPPED AT CUSTOMER

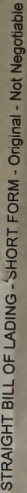
WESTROCK SHIPPING SIGNATURE

DATE RECEIVED

Page
1 of 1

1 CUSTOMER'S RECEIPT

COMPANY:



STRAIGHT BILL OF LADING - SHORT FORM - Original - Not Negotiable

CUSTOMER'S RECEIPT

CARRIER USE: For all shipments where WestRock is responsible for freight payment please remit

**Mishawaka Plant-
1925 STONE COURT
MISHAWAKA, IN
46545-4486**

voices to:
WestRock CP, LLC
C/O Cass Information Systems
P.O. Box 67
St. Louis, MO 63166-0067

Master BOL Number: 438202534946

SHIPPING MANIFEST
(Delivery Receipt)

RECEIPT #: 4382158648

DATE: 4/23/2025

BILL TO
CONAGRA FOODS INC
PO BOX 982192
EL PASO, TX
79998-2192

FULLFILL INDUSTRIES
400 N MAIN ST
HENNING, IL
61848-8000

ACCOUNT NUMBER 317052

| LOCATION # | 600948 |
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| 100 | 100 |

LOAD # 34946

The Carrier shall deliver the goods subject to the following conditions:
The Carrier shall make delivery of this shipment without payment of the freight and all other lawful charges. Received, subject to the above conditions, by the consignee or its authorized representative, who hereby acknowledges receipt of the goods described herein.
COMMON CARRIER AGREEMENT is the contract # BETWEEN The Shipper and the Carrier in effect on the date of shipment, the property described below, in apparent good order, except as noted or contracts of carriage previously marked, consigned, and destined as indicated below. This Bill of Lading is not subject to any tariffs or class rates. Subject to terms and conditions prescribed in part 1035 Appendix B, Title 48, Code of Federal Regulations, specifically agreed to in writing by the shipper and carrier, and sufficient local laws or every trailer to ensure security of products during transit. NOTE: Carrier assumes no responsibility for loss or damage to cargo.

CARRIER:

CL SERVICES INC

| | |
|-------|------|
| SCAC: | CVQC |
|-------|------|

SHIPPING INSTRUCTIONS: Receiving hours: 06:00AM-15:30. Must make na appointment: deliveries@conagra.com and kelly.scott@conagra.com

0606

| | |
|---------|---------|
| Freight | PrePaid |
|---------|---------|

| | |
|---------|---------|
| Freight | PrePaid |
|---------|---------|

| ORDER NO | CUSTOMER PO# | QTY ORDERED | DESCRIPTION | UNITS | QTY/UNITS | TOTAL COUNT | PIC |
|----------|--------------|-------------|--|-------|----------------|-------------|-----|
| 9959967 | 4821980- 10 | 540 | IDENT:1006710 STYLE:HSC wrap on drawing bottom 44 1/2x40 x 38 MSP 37 907 PRODUCT DESIGN NO. 1281111 | 3 | 1 145 2 200 | 545 | C |

SUBJECT TO INSPECTION

Signature _____

PALLETS RECEIVED:

| | |
|----------|-------|
| TOTAL FT | 37907 |
|----------|-------|

UNITS: 3

TOTAL WEIGHT:
3,715

RECEIVED IN GOOD ORDER BY

TRAILER DROPPED AT CUSTOMER

WESTROCK SHIPPING SIGNATURE

DATE RECEIVED

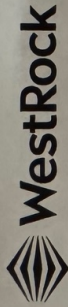


Page 1 of 1

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CUSTOMER'S RECEIPT

COMPANY:



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CUSTOMER'S RECEIPT

Mishawaka Plant-
1925 STONE COURT
MISHAWAKA, IN
46545-4486

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Master BOL Number: 438202534946

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FULLFILL INDUSTRIES
400 N MAIN ST
HENNING, IL
61848-8000

ACCOUNT NUMBER

317052

LOCATION #

600948

LOAD #

34946

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TRAILER #

P5260130

CARRIER:

CL SERVICES INC

SCAC:

CVQC

SHIPPING INSTRUCTIONS: Receiving hours: 06:00AM-15:30. Must make an appointment: deliveries@conagra.com and kelly.scott@conagra.com

SEND COA WITH EVERY SHIPMENT - MUST SEAL TRAILER - SEAL # A528406

Freight

PrePaid

| ORDER NO | CUSTOMER PO# | QTY ORDERED | DESCRIPTION | UNITS | QTY/UNITS | TOTAL COUNT | P/C |
|----------|--------------|-------------|---|-------|---------------|-------------|-----|
| 9945264 | 4826053-10 | 750 | IDENT:10008706 STYLE:HSC w/Flap on drawing bottom 47 5/16 x 38 1/2 x 42 3/16 MSF: 80789 PRODUCT DESIGN NO: 1281130 | 7 | 1 60 6 125 | 810 | C |

PALLET(S) SHIPPED:

SUBJECT TO INSPECTION

Signature *Kelly Scott 4-24-25*

PALLET(S) RECEIVED:

TOTAL FT2:
60789TOTAL UNITS:
7TOTAL WEIGHT:
6,140

RECEIVED IN GOOD ORDER BY

☐ TRAILER DROPPED AT
CUSTOMER

WESTROCK SHIPPING SIGNATURE

DATE RECEIVED



4382158649

Page
1 of 1

1

CUSTOMER'S RECEIPT

COMPANY: